

SD (3/14)  
JUL 14  
9/11/14

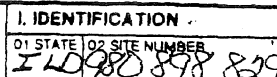
<b>POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT</b> PART 1 - SITE INFORMATION AND ASSESSMENT				<b>I. IDENTIFICATION</b> 01 STATE 02 SITE NUMBER IL 4980 898 829	
<b>II. SITE NAME AND LOCATION</b>					
01 SITE NAME (Legal, common, or descriptive name of site) Dupo Oil Co.			02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER NE 1/4 of Sect 34 T-1-S, R-10-W		
03 CITY Sugar Loaf Township		04 STATE IL	05 ZIP CODE 62239	06 COUNTY St. Clair	07 COUNTY CODE 163
08 COORDINATES 38 29 52		09 LONGITUDE 090 11 07		Columbia 7.5' Quad (242)	
10 DIRECTIONS TO SITE (Starting from nearest public road)  See Attached Map					
<b>III. RESPONSIBLE PARTIES</b>					
01 OWNER (If known) FERNA HOFFMAN			02 STREET (Business, mailing, residential) R.R. #1		
03 CITY Dupo		04 STATE IL	05 ZIP CODE 62239	06 TELEPHONE NUMBER UNK	
07 OPERATOR (If known and different from owner) Dupo Oil Co			08 STREET (Business, mailing, residential) Box 223		
09 CITY Dupo		10 STATE IL	11 ZIP CODE 62239	12 TELEPHONE NUMBER UNK	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: _____ / _____ / _____ MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (RCRA 103 (c)) DATE RECEIVED: _____ / _____ / _____ MONTH DAY YEAR <input checked="" type="checkbox"/> C. NONE					
<b>IV. CHARACTERIZATION OF POTENTIAL HAZARD</b>					
01 ON SITE INSPECTION <input type="checkbox"/> YES DATE _____ / _____ / _____ MONTH DAY YEAR <input checked="" type="checkbox"/> NO BY (Check all that apply): <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____					
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input checked="" type="checkbox"/> C. UNKNOWN			03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ UNK <input checked="" type="checkbox"/> UNKNOWN		
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Oily Waste (Toxic) Heavy Metals (Soluble/Toxic/Persistent)					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Ground Water (Population/Environment)					
<b>V. PRIORITY ASSESSMENT</b>					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input checked="" type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
<b>VI. INFORMATION AVAILABLE FROM</b>					
01 CONTACT		02 OF (Agency/Organization)		03 TELEPHONE NUMBER	
04 PERSON RESPONSIBLE FOR ASSESSMENT Rich Lange		05 AGENCY IEPA	06 ORGANIZATION HSCS	07 TELEPHONE NUMBER (217) 782-6760	08 DATE 09 09 85 MONTH DAY YEAR

EPA FORM 2070-12 (7-81)

EPA Region 5 Records Ctr.



311414



## 03 WASTE CHARACTERISTICS CHAIN OF CUSTODY RECORD

NO OF DRUMS

I HIGHLY VOLATILE  
J EXPLOSIVE  
K REACTIVE  
L INCOMPATIBLE  
M NOT APPLICABLE

CATEGORY	SUBSTANCE NAME	D1 GROSS AMOUNT	D2 UNIT OF MEASURE	D3 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE	Unk	Unk	Crude Oil
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	Unk	Unk	Brine Waste
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS	Unk	Unk	Brine Waste

[illegible]

CATEGORY	O1 FEEDSTOCK NAME	O2 CAS NUMBER	CATEGORY	O1 FEEDSTOCK NAME	O2 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

Federal S.I.A. #81960



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

D1 STATE D2 SITE NUMBER  
IL 0980 898 839

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 <input checked="" type="checkbox"/> A GROUNDWATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED <u>4,269</u>	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION <i>Highly soluble brine waste placed for disposal in unlined lagoon. This practice has impacted private wells at similar facilities.</i>	<input checked="" type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> B SURFACE WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> C CONTAMINATION OF AIR 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> D FIRE/EXPLOSIVE CONDITIONS 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> E DIRECT CONTACT 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input checked="" type="checkbox"/> F CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED <u>Unk</u> <small>(ACRES)</small>	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION <i>Loss of production (Ag land) &amp; damage to soil structure has been noted at similar sites.</i>	<input checked="" type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input checked="" type="checkbox"/> G DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED <u>4,269</u>	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION <i>See A above</i>	<input checked="" type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> H WORKER EXPOSURE/INJURY 03 WORKERS POTENTIALLY AFFECTED: _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> I POPULATION EXPOSURE/INJURY 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE _____) 04 NARRATIVE DESCRIPTION	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
IL	0980898829

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 <input checked="" type="checkbox"/> J. DAMAGE TO FLORA 04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input checked="" type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
The near sterilization of soils (>5 acres), Attributed to increased soil salinity, has been noted at other similar sites. (See F Above) (See 05 other following)	
01 <input type="checkbox"/> K. DAMAGE TO FAUNA 04 NARRATIVE DESCRIPTION (include name(s) of species)	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> L. CONTAMINATION OF FOOD CHAIN 04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> M. UNSTABLE CONTAINMENT OF WASTES (Spills, runoff, standing liquids, leaking drums) 03 POPULATION POTENTIALLY AFFECTED _____	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED 04 NARRATIVE DESCRIPTION
01 <input type="checkbox"/> N. DAMAGE TO OFFSITE PROPERTY 04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
01 <input checked="" type="checkbox"/> P. ILLEGAL/UNAUTHORIZED DUMPING 04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
Site was infrequently inspected by regulatory agencies, Facility has now been backfilled making illegal dumping hard to detect.	
05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS Erosion of soils by brines is deemed leading cause of soil erosion in several Ill. counties.	

III. TOTAL POPULATION POTENTIALLY AFFECTED: 4269

IV. COMMENTS

Dupo Oil Co. Information as appears  
Address Unreported on EIRIS (L-4)  
Dupo, IL 62239

V. SOURCES OF INFORMATION (City specific references, e.g. state files, sample analysis, reports)

S.I.A. study

## EXECUTIVE SUMMARY

This site has been placed in the ERRIS data base as a result of its selection for Phase II evaluation during the federally funded Surface Impoundment Assessment (SIA) study of 1980. During ERRIS placement the operator name and business address were utilized from the SIA which results in deviations from ERRIS for actual site location, Part I section II items 02 through 08 of form 2070-12. This use of operator name and address has also led to one (1) ERRIS listing representing, in actuality, from one (1) to one hundred eight (108) actual brine pits at an equal number of separate locations.

Some considerable effort has been expended to select the site with highest, Phase II SIA, pollution potential where multiple sites are represented by a single ERRIS listing. One must keep in mind that the Phase II SIA represents no more than 7 percent of the brine pits identified in Illinois. Phase I identified more than 3200 pits where Phase II evaluated a random selection of less than 220. One must also maintain a realization that phase II pollution potential was determined by bench top study with little or no actual site visitation or monitoring.

Minimal to no file information exists on this site beyond that contained in Phases I and II of the SIA. There is no direct evidence of hazardous waste disposal at this site beyond the potentially hazardous constituents of Illinois Basin brines, but with only annual inspections by Illinois Mines and Minerals staff relevant to oil production practices and recent backfilling of most brine pits in Illinois, disposal of off site material of unknown nature is possible. A literature review and laboratory analysis of samples from two other sites indicate concern for contamination of groundwater/surface water by Sodium, Sulfate, Chloride etc. (Non-Hazardous Constituents), concern for heavy metals (i.e., Chrome, Vanadium, Barium) and long chain hydrocarbons.

A question arises as to the addressability of the heavy metals by CERCLA when one considers 40 CFR section 300.6 "Definitions - Federally Permitted Release (i)" and Section 101(10) of CERCLA. The statement "and which are reinjected" seems to allow CERCLA action, but interpretation and clarification by USEPA legal staff seems required. The long chain hydrocarbons would appear to be included in the exclusion given to crude oil and fractions thereof under 40 CFR section 300.6 "Definitions-Hazardous Substance" and 101(14) of CERCLA.

A medium priority has been assigned due to the potential impact of this site on groundwater in a rural area where private wells are generally the sole source for potable water. Similar sites have impacted private wells to a point requiring users to seek alternative sources for drinking water. A site inspection should be scheduled to verify/update owner-operator information and gain more thorough site specific information.

RML:bf/22

